Recruitment and Enrollment of Children with Disabilities and Suspected Delays: Challenges and Solutions

Jennifer Fung: Hi, everybody, and welcome to our March "Inclusion" series webinar. Today in our webinar, we will be focused on challenges and solutions related to recruiting and enrolling children with disabilities and suspected delays in Head Start programs.

My name is Jennifer Fung, and I am the inclusion lead for the National Center on Early Childhood Development, Teaching, and Learning, or DTL as we call it. And I am so thrilled to be joined today by a very special guest presenter, Dayana Garcia. Dayana, hi.

Dayana Garcia: Hi, Jen. Thanks for inviting me.

Jennifer: How are you?

Dayana: I'm good.

Jennifer: Thanks for being here. Would you like to say a little bit about yourself?

Dayana: Sure. I'm Dayana Garcia with the Office of Head Start, and I'm the inclusion and disabilities services specialist. And my background is in special education. I was a special-ed teacher, a disability services coordinator for a Head Start grantee, and I feel like Head Start is my blood. And I am thrilled to be here and talk about all of these issues that we go through as you all do the role of disability services coordinator. Thank you, Jen.

Jennifer: Thanks, Dayana. I love to hear that. So, thank you very much again for being here.

And we'll get started by sharing our agenda for today. We are going to be discussing recruitment and enrollment for children with disabilities and suspected delays. We are going to talk about some common questions that come up during this process, and we'll also be hearing about some common challenges that we hear often from program staff. Most of the session will be focused on providing answers to these questions, and we'll also focus a lot on sharing strategies, approaches, and resources to help programs successfully enroll children with disabilities and suspected delays. At the end of the webinar, we are going to do a question-and-answer session with Dayana. And we want to acknowledge, before we begin, that while the webinar today will mainly discuss general challenges and strategies for recruitment and enrollment, we recognize that recruitment and enrollment during this year – and looking ahead to fall 2021 – may present you unique challenges related to the pandemic.

And last but not least, let's quickly take a look at our objectives for this webinar. By the end of the webinar, participants should be able to discuss common questions and challenges that programs often encounter when recruiting and enrolling children with disabilities and suspected delays and, most importantly, should be able to identify strategies and approaches that can support successful enrollment.

OK, so, let's get started with a little quiz. OK. During the 2018-2019 year, what percentage of children enrolled in Head Start and Early Head Start programs had an IFSP or an IEP? Was it 10.4%, 12.7%, or 13.3%?

So, if you wouldn't mind just taking a second to make a guess or select the answer that you feel confident about on the poll that you see on your screen. Alright, so, I'm starting to see lots of responses coming in.

Dayana: Great. I see those coming in as well. That's wonderful.

Jennifer: Perfect. OK, I can't wait to hear the answer. Thank you so much, everybody, for participating in the poll. We're going to give just a couple more seconds before we ask Dayana what the answer to this question is.

OK, great. Let's find out. So, thank you again to everybody for participating in that poll. Dayana, what is the answer to this question?

Dayana: Thanks, Jen. Well, the answer to the question is "D." According to the 2018-2019 PIR, 13.3% of children served by Head Start and Early Head Start programs were children with disabilities. That was 136,717 children.

Jennifer: Wow, Dayana! That is a great number.

Dayana: It is. Head Start has a strong history of inclusion of children with disabilities and suspected delays. In fact, Head Start is the oldest public inclusive early-childhood program in the U.S. And the 10% requirement was established in 1972 as a way to ensure that children with disabilities and developmental delays and their families were still served in this program. Since then, over 3 million children with disabilities have fully participated in Head Start. And as we just learned, nationally, Head Start successfully reaches the 10% enrollment goal. Our grantees have a strong commitment to providing high-quality inclusive services.

In addition to Head Start's long tradition of inclusion, in 2015, the Department of Health and Human Services and the Department of Education worked together to develop and disseminate a joint policy statement on inclusion in early-childhood programs. In this policy statement, the department took the strong position that all young children with disabilities should have access to inclusive, high-quality early-childhood programs, where they are provided with individualized and appropriate support in meeting high expectations. A link to this policy statement is on the webinar's resource list, which you can find by clicking the green Resource widget.

But even with all this promise, we know that some programs and grantees are struggling with meeting this goal. Just for a moment, let's stop thinking about the 10% requirement and think about it as the percentage of times you do the right thing to include children with disabilities. Let's think about the right thing to do for children and families. So, what is your percentage? Today we're going to talk some about the challenges and potential strategies to not only meet the 10% but exceed it.

Jennifer: Great, Dayana. I love that perspective and talking about that strong history of inclusion in Head Start. I think that's something to be really proud of, and I'm so excited.

Like you said, we know that there are common questions and challenges that programs may face when recruiting and enrolling children with disabilities and suspected delays. And I'm really excited today to talk to you to address some of those challenges and really, like I said, to emphasize strategies and solutions that programs can start using right away.

So, today, as we discuss the questions and the challenges and, again, also the strategies and solutions, we're going to be breaking them down across three different categories. We'll be talking about some procedural questions; we'll be talking about challenges with practice; and we'll also be talking about challenges and solutions with partnerships. And of course, we'll be sharing answers, information, suggested strategies, and lessons learned across these three categories.

So, we'll get started today by talking with Dayana about some of the procedural questions that she hears a lot. We'll only have time to highlight just a few of the most frequent questions, but remember, if you have questions that we don't get to, be sure to check in with us in the Q&A. So, Dayana, I know you get a lot of questions about recruiting and enrolling children with disabilities and suspected delays, especially – as we talked about – around that 10% enrollment requirement. What are some of the most common questions that you receive?

Dayana: Yes, Jen, we receive a lot of questions about the details of the 10% requirement. According to the performance standard 1302.14(b), Head Start programs must ensure at least 10% of the total funded enrollment is filled by children who are eligible for services under IDEA. As we saw earlier, nationally, this requirement is met. According to the past six years of PIR data, at least 12% of the total funded enrollment has been children with disabilities. Of course, right now, we are receiving many questions about the 10% requirement during this very unique year. So, let's start with a question that's specifically about this year.

Jennifer: It's a great idea, Dayana. So, I'm looking at this question, and it's asking if, in this 2020-2021 program year, if programs are required to meet the 10% requirement. So, what's the answer to this question, Dayana?

Dayana: That's a great question, and the answer is no. In the program year 2020-2021, the 10% disability requirement will be based on a program's actual enrollment. If programs are unable to ensure 10% of their actual enrollment is filled by children eligible for services under IDEA, they must submit a detailed request for a waiver – disability waivers. Grantees should be sure that they are still using adequate tracking and documentation records to recruit, enroll, and provide services to their required percentage of children with disabilities throughout the program year. We know that programs may not have known their actual enrollment capacity at the beginning of the program year, and because of this, programs may submit a waiver request later in the program year.

Jennifer: OK, great, Dayana. That's really helpful. Thank you. And before we move on, can you clarify what's meant by the total funded enrollment?

Dayana: Yes, of course. The standard states that programs must have 10% of their total funded enrollment be children with disabilities. And there has been a lot of confusion previously about whether ... if a program has Head Start and Early Head Start, if they need to meet 10% enrollment in each program. It's 10% of the total funded enrollment, and that is 10% of the total funded for each grant.

Jennifer: Great. So, thank you very much for making that more clear. I know there are a lot of questions about that. And just a couple more points to clarify around just who counts towards the total funded enrollment. So, my understanding is that children who have been evaluated and found eligible for IDEA services, regardless of whether or not they were actually receiving those services, that those children count towards the 10% requirement. So, if a child is found to be eligible, but the family does not consent to receive IDEA services, that child still counts towards the 10% requirement. And also, children who are waiting for an evaluation or who are in the process of an evaluation, do not count towards the 10% requirement. Is that right, Dayana?

Dayana: That is right, Jen.

Jennifer: OK, perfect.

Dayana: That is correct.

Jennifer: Great. Thank you for clarifying that. So, back to our questions. What other questions do you hear related to the 10% requirement?

Dayana: So, we get a lot of questions about the timing of the documentation for the 10% requirement as one of the questions.

Jennifer: OK, and that makes a lot of sense. I've heard that as well. So, this question we have here is asking when programs need to meet the 10% enrollment and when the enrollment percentage needs to be documented. So, what's the answer to this question?

Dayana: So, we recognize that not all children with disability in programs will have been found eligible when they enroll. In fact, nearly half of the children with disabilities in Head Start and Early Head Start are diagnosed after they enroll in the program, which is important, as we know how critical early intervention and access to early intervention is for positive outcomes for young children. This usually occurs through the screening or ongoing assessment process and through referral.

The referral and eligibility process takes time, so the Office of Head Start expects that programs may be midway through the program year. So, for many programs, this may be January before reaching the 10% requirement. Best practice would be to document this number on an ongoing basis in order to monitor progress, share data, and plan for continuous improvement. The

enrollment percentage is reported on the annual Head Start Program Information Report, or PIR, and the 2020-2021 PIR is due no later than August 31st of this year. So, programs are encouraged to submit their reports as soon as their program year is complete.

Jennifer: OK, great. Thank you, Dayana. Are there any other questions that you often hear related to the 10% requirement?

Dayana: Yes. This is another we often hear: "Who is responsible for documenting the 10% enrollment?" So, as I mentioned, the enrollment percentage is reported on the PIR. A separate PIR must be completed for each grantee and each delegate agency. And separate reports must be completed for Head Start and Early Head Start programs. So, within each program, the person who is responsible for operations and oversight in this area, including the appropriate record-keeping and reporting person, may vary, so it may be different from one program to another. But there's always someone who's responsible for filling out the PIR.

Jennifer: Perfect. That makes sense. And now for our last question. I know this is a question that you hear a lot, Dayana. What does a program do to get a waiver?

Dayana: Yes. We know that sometimes programs do everything possible to recruit and identify children who meet the qualifications, and it still doesn't meet the 10% requirement.

Jennifer: Right, exactly. So, we know programs are doing a lot – like you said, everything possible. So, if a program has posted notices in the library or posted notices in the community center in many languages, and maybe they've met with public health nurses and provided handouts to share with families, we know that programs are meeting with the local school districts' Child Find coordinator. Let's say they've done all this and they still aren't able to meet the requirement. Then what are the steps? What should they do?

Dayana: So, Jen, after a program has really made a great effort for its recruitment but doesn't anticipate being able to meet the requirement, then the program needs to alert their Regional Office. So, if after further discussion with the Regional Office, the 10% requirement still can't be met, then the program director, along with the disability services coordinator, can ask for a waiver or exception for this requirement from their Regional Office.

Jennifer: OK, great. That makes a lot of sense. Thank you so much, Dayana, and thank you for answering all of those questions. I know that those are questions that are on a lot of people's minds.

Dayana: That's right.

Jennifer: And this is the perfect lead-in to our next section. Really starting to dive in to a discussion of challenges and strategies in that practice category. And really quickly, before we dive in, just another reminder to everybody: Be sure to keep putting your questions in the Q&A widget, and we will try to get to as many of those as we can, either during the webinar or during our question-and-answer time at the end of the webinar.

OK, before we get started with the practice section, let's do a really quick poll. So, please take a couple seconds to look at the question here on the screen. "What is your biggest challenge related to recruiting and enrolling children with disabilities and selected – I'm sorry – suspected delays?" So, we've got lots of options here. Make sure that as you're looking over these poll questions, that you scroll down in the window that's popped up there, so you can see all the different options.

So, when you think about your biggest practice challenge related to recruitment and enrollment, is it related to getting the word out to families who might be eligible? Is it a challenge with helping families of children with disabilities or suspected delays understand how Head Start programs can support their child? Is it through the referral and screening process and identifying children who might be eligible? So, take a moment and look through these options, and let us know: What are your biggest challenges related to recruitment and enrollment?

Dayana: And I can't wait to see the responses, Jen. I'm very interested in this poll.

Jennifer: Me too. OK, so I'm seeing a lot coming in. Thank you, everybody.

Dayana: That's great.

Jennifer: Yep, I'm seeing some responses coming in around coordinating. Great. So, we'll just give a couple more seconds. Thanks to everybody who's already participated. Alright, great. So, thank you again, everybody, for all your responses.

Dayana, as we just saw, there are definitely some practices that are challenging. And knowing that we're not going to be able to cover everything that's challenging during this webinar, when you think about some of the common challenges and barriers in this area of program practices, what would you say some of the most common challenges and barriers are?

Dayana: You're right, Jen. There can be different challenges in this area. I'd say that some of the challenges that we hear about most often are related to recruitment and enrollment of children with disabilities, for sure.

Jennifer: Yep, yep. That makes a lot of sense, Dayana, especially based on some of the questions that we talked about in the first section, what we just saw in the poll, and some of the questions that are already coming through the Q&A. So, I'd love to talk a little bit more in depth about recruitment and enrollment, Dayana, and especially thinking about – you know, hearing what some specific challenges are, but then also really talking about some potential strategies. So, when you say, "Recruitment and enrollment can be a challenge or a barrier to enrolling children with disabilities," what do you mean by that?

Dayana: So, there are different challenges in this area for different programs. It can be pretty variable, but I'd say that a very common challenge in recruiting and enrolling children with disabilities or suspected delays occur when programs don't have effective partnerships in place

with the local education agency, or LEA, or with the Part C providers in the community. Another challenge can be when programs don't have existing partnerships with community partners, such as health centers, that can support or recommend efforts.

So, we'll talk a lot about creating effective collaboration partnerships in the next section, but I want to focus especially on recruitment and enrollment efforts for a few minutes. The great news is that there are a lot of strategies and approaches that programs can use to support recruitment and enrollment of families of children with disabilities. Our colleagues at the National Center on Program Management and Fiscal Operations, or PMFO, have some great tips and strategies for eligibility, recruitment, selection, and enrollment. I want to highlight just a couple. The first is to use community assessment data to support recruitment efforts. We know that disability services coordinators play a big role in recruitment and enrollment efforts.

The DSC should closely with program management to become familiar with the community assessment data. Data can help identify children with disabilities or suspected delays, including types of disabilities in the service area, and can also provide information about any relevant services and resources in the community. Community agencies serving children with disabilities may be a resource to you, in terms of recruiting or as a partner for service delivery. So, by revealing the community data, the DSC and administrators may identify gaps in the community services. Knowing where these gaps are can open up possibilities for new partnerships, both to get the word out to families and to provide needed services.

Another great strategy is to focus on strong positive messaging that can support a program's recruitment and enrollment efforts. The way staff communicate with families can encourage or discourage enrollment. The disability services coordinators can help programs – program recruiters be aware of and use words and language that are respectful, supporting, and encouraging of children with disabilities and their families. They can also help recruiters communicate the program's commitment to the full and effective participation of children with disabilities and their families.

So, PMFO has some great guidance around recruitment messaging, called the "Four A's." And the "Four A's" are: making sure you're information is accurate; making sure your information is audience-specific; making sure your messaging is appealing; and making sure your messaging is accessible.

Jennifer: That's great. I really love the specific guidance. And I know that disability services coordinators can really help programs use strengths-based language when they're referring to children with disabilities, and really focusing on describing the benefits of inclusion. We know that there are so many for children with and without disabilities. So, when DSCs are thinking, and programs are thinking, about shaping strong messaging, here are some other things to consider. So, when you're connecting or when you're thinking about the audience, really think about how to make sure your outreach efforts connect with the many different adult caregivers that children may have. So, we know that they are diverse and might include stepparents, grandparents, aunts, uncles, or foster parents. You know, families can be biological or nonbiological or chosen or circumstantial. So, families are really connected through cultures,

languages, traditions, shared experiences, emotional commitment, and mutual support. We know that some programs have found success with really targeted outreach to fathers of young children. So, they'll find out where fathers are likely to gather in the community, maybe a barbershop or a recreation or community center, or the lunchroom of a local employer, and then programs will distribute some father-friendly materials about their programs to these places.

And another consideration, when you're thinking about an appealing message, is to really, as I mentioned, consider whether your messaging uses language that is strengths-based and respectful of people with disabilities and delays. Another important consideration that we hear about a lot is to really think about talking up the services your program has to offer, especially thinking about promoting Head Start's comprehensive services, including the coordinated, inclusive services for young children with disabilities.

And one last important piece of messaging to think about highlighting is thinking about, as I mentioned, the benefits of inclusion for all young children. We know that there are so many positive outcomes for children with and without disabilities who participate in inclusive programs. Let's make sure that everybody knows about this. So, when you're planning to make your messaging accessible, really thinking about planning to reach out in many different ways, whether that's on social media or on community message boards or through printed materials in places where members of your community are likely to visit or gather. So, all of these considerations are really important to think about. And then, again, thinking about accessibility – making sure that materials and messages are in the home languages of the families in your community.

So, thank you, Dayana, for highlighting those really important points about targeted recruitment and outreach. I think that's a lot of really great suggestions for programs to think about. We also want to remind everybody again to make sure to check out the webinar resource list, which you can find by clicking on the green Resource widget. We've included links to a lot of great information, including some guidance from our colleagues at PMFO on adapting eligibility, recruitment, selection, and enrollment tasks when so many services right now are being provided virtually or remotely. The "Disability Services Coordinator Orientation Guide" is another great place to look. There is a great ERSEA worksheet in the orientation guide and an action plan in the appendix of the guide. So, be sure to check those out if you haven't already.

And really quickly, before we move on, I also wanted to mention screening as a tool and a strategy for identifying children who may have delays or disabilities, since this is such an important part of identifying children who might be eligible for IDEA services after they're enrolled in programs. We know that screening can be a challenge for many programs and that especially now when, as we just mentioned, services are being provided virtually or remotely or through a hybrid model. So, even though we're not going to talk specifically about remote screening during this webinar, we've included some resources on that resource list that we think will really help support programs who are having a hard time with remote screening. So,

the resources that we've included include a link to a list of screening tools that have the potential to be used remotely, as well as a four-step framework for conducting virtual screening. So, be sure to take a look at that if you haven't already. So, now, let's take a look at some challenges and strategies that are related to partnerships, which, again, we know are such an important part of recruitment and enrollment of children with disabilities.

OK, so before we get started talking about partnerships, let's do another quick poll. So, if you see the poll here on your screen – and you see the question – "What is your biggest challenge related to partnerships that support disability services and inclusion?" So, take a moment and think about what some of your biggest challenges or barriers that your program may be facing, and let us know by participating in the poll.

OK. So, is your – are some of those challenges related to finding organizations and groups to partner with? They might be related to creating partnership agreements or MOUs, maintaining ongoing collaboration and communication, addressing conflicts or solving problems as they arise during those partnerships. We're seeing lots of responses coming in.

Dayana: Yep. Lots of responses coming in. I'm excited to see this.

Jennifer: Yeah. Thanks, everybody. We're going to leave this up for just a couple more seconds.

Dayana: Yes. OK.

Jennifer: Alright. Perfect. So, thank you all again for weighing in. And let's start talking about partnerships. So, Dayana, as we just saw and talked about previously ... One, we know how important partnerships are. They're so critical to this coordinated approach for services for children with disabilities and their families, but, as we just saw, we know that there can definitely be some challenges in this area. So, I'd love to ask you, again, knowing that we're not going to be able to cover everything that's challenging during this webinar, what would you say some of the most common challenges and barriers in this area are?

Dayana: Yes, I think this is such an important part of providing coordinated and effective services for children with disabilities. Strong partnerships can have a really positive impact on services for children and families, but creating these partnerships can be a challenge sometimes. I'd say that some of the challenges that we hear about most often are related to navigating issues with the referral and eligibility assessment process.

Jennifer: OK.

Dayana: Also, for some programs, there can be confusion around referral and eligibility process with the local partner agencies. For example, what programs are aware of the actual steps for making a referral and what happens during the eligibility assessment? Some programs might not be aware of the specific legal requirements, including the timelines for the process, or they may not be clear about what families' rights are during this process. Another aspect that can make this process confusing is that information that programs receive from agencies during the

referral process can vary, from one state to the next, from one county to the other. So, for example, one school district may receive a referral and begin the eligibility determination process right away, and another district may tell the program to try a response to intervention, or RTI, approach with the child before making that referral. So, things vary in different places.

Another big challenge is when delays in the assessment process that can lead to delays in kids being determined eligible in assessing IDEA services, and we know that that's specifically a challenge, or was a challenge during the pandemic.

Jennifer: Right. Yeah. So, being unclear about this process and all of the related requirements and processes and policies is a real challenge that we hear about. But, again, focusing on solutions and strategies, the great news here is that there are a lot of resources available to support programs in learning and in DSC, specifically, in learning more about this referral and eligibility process. So, again, looking back at our webinar resource list, we've listed several resources on the guide, which you'll find, again, in the green Q&A – or I'm sorry – in the green resource widget. But the first place that I definitely recommend starting with is the "Disability Services Coordinator Orientation Guide," which I mentioned before. In the first chapter of the guide, called "The Basics," there is a whole section on referring and evaluating children, which has got some really great, specific information about the referral and evaluation process, including specific information about Head Start Program Performance Standards that are related to referral and evaluation, information that refers to or describes the DSC's role with families and other program stuff, and with partner agencies during this referral and evaluation process. The guide also provides specific information about IDEA legislation that's related to referral and evaluation, to help clarify some of those outstanding questions that might be there. And then, it also describes tips for supporting a smooth referral and evaluation process, which we know can be confusing and challenging for many families.

So, there's even a section in the orientation guide, which is located in Appendix D, that provides a detailed list of steps for screening, referral, and evaluation. That section also provides some clarification on the information that you mentioned, Dayana, including information about the timelines for completing evaluations and information about agencies that might be requesting an RTI approach be used before a referral can be made. So, definitely recommend taking a look at that first section of the orientation guide if you haven't already. I know I have a copy of the "DSC Orientation Guide" printed that I keep on my desk at all times.

OK, so let's talk a little bit about creating strong collaborative partnerships. So, we know that this is a really important part of Head Start and Early Head Start Program approach in general, but, also, as we've talked about, creating these strong partnerships really can result in high-quality services for children and families. So, some of the specific benefits of effective partnerships that — one, our families receive consistent information. We know there's a lot of information coming at families during the referral and eligibility and process and as families start to access services for their children. Another benefit is that different providers can work together to share and build on one another's expertise. And as a result of these collaborative partnerships, children can really receive coordinated, effective services.

So, I'd love to take just a really quick high-level look at some characteristics of effective partnerships. So, we know that, within effective partnerships, the different partners communicate regularly, openly, honestly, and transparently. We know that all partners on a team have a shared purpose and have clear goals that really drive their collaboration and their work together. We know that the different members of effective partnerships establish clear roles and kind of governance structures that really define the various roles and responsibilities of each partner agency or organization. We know that effective partnerships also have done work to establish and adhere to a set of ground rules that really guide the partnership in its work. We also know that effective partnership are flexible and that they adopt an innovative mindset and really adapt to changing conditions and resources. We know that effective partners cultivate teamwork, which really enables the entire group to benefit from the various partners' strengths and contributions that, again, can enhance the collective benefit and efficiency and effectiveness of that team. And last, we know that effective partnerships, we see that partners can identify and settle conflicts swiftly and creatively as challenges arise.

Dayana: Yes, and these characteristics represent really important steps that agencies can take in establishing and maintaining partnerships. One of the things we have learned is that partnerships really rely on give and take. If you find that a partnership isn't as strong as it needs to be, think about how your program can give just a little bit more and make your program a valuable asset to the partnership you are trying to establish. For example, we heard from one program that found that their family materials were translated in many more languages than the school district's resources. So, they went ahead and sent the early childhood coordinator some of the materials that they developed – some informational handouts or school readiness, early literacy, and the benefits of learning in two languages.

Jennifer: That's great, I love that strategy and that idea of give and take, and giving and showing your partners what a valuable partner you are, and this partnership is such a great strategy. Thank you for sharing that. So, yeah, we know that creating collaborative, effective partnerships can be a challenge, and we know that it definitely takes time and effort, and again, we know that effective teams really intentionally engage in different stages of partnership and make decisions and develop processes for how they're going to work together and how they're going to communicate, and that these processes really intentionally include processes for decision-making and resolving and addressing conflicts when they might arise. So, our partners at PMFO have developed some really great resources for developing strong collaborative partnerships, and again, we've included these on your webinar resource list.

So, I wanted to highlight just a few really basic strategies that PMFO has identified for working together as a collaborative team. The first is to share a vision. So, establishing a shared philosophy and mission which can really help provide a foundation and a focus for this partnership, but that also can help with decision-making and conflict resolution. We also, as I mentioned, know that partners should communicate often and that they should intentionally decide how and when to communicate, how they're going to exchange information, and again, how they're going to address emerging issues. We said this takes time. We know that partners work at it. The team should determine its values such as trust or communication, respect,

inclusion, and that these values will really guide how the group will work together. We know that the team should also clarify their expectations, so this should really begin with developing that common understanding and agreement with partnership expectations, and that these expectations should be used to develop a detailed, written agreement that has clear, measurable expectations, including who does what, when they do it, and how they do it. And this agreement should also list expected outcomes for all parties in the partnership. And as we just heard from Dayana, reach out. Team members should network with, learn from, and communicate regularly with colleagues who have experience or specialization in similar partnerships.

So, before we move on, Dayana, I'd love to talk a little bit about these partnership agreements or the interagency memorandum of understanding, or MOU. So, we know established, effective partnerships can really improve the services that are provided to children and families, and that an interagency MOU can really define what these partnerships look like and set the stage for those effective collaborative partnerships. So, Dayana, we know THAT Head start programs are required to develop the interagency agreements with the agencies they work with, including the local IDEA Part B and Part C agencies. So, what should programs consider when they are creating these MOUs and specifically what do disability services coordinators need to know about these MOUs?

Dayana: Yes, that's really important. Programs must establish an interagency MOU with the IDEA Part B local agency and with the IDEA Part C agency in their service area. The MOU defines how the program and partner agency will work together to first identify children who may qualify for services under IDEA, which could be through screening and evaluation process, or with the local agency's child find efforts. Then they need to ensure effective coordinated services for children who are eligible under IDEA, and this might include defining the referral and evaluation process, which is so important. The service coordination, the service delivery in least restrictive environment, and the transition services, and then develop and review the IEP or IFSP plan for its implementation and ensure continuity of services as infants and toddlers move from Part C to Part B services for preschoolers, and as preschoolers move from Head Start to kindergarten.

Jennifer: OK, great. Thank you, Dayana. So, what should programs, and again, especially disability services coordinators, consider when they're creating these MOUs that foster collaborative, productive partnerships?

Dayana: Yes, the disability services coordinators play a huge role in establishing an MOU. While the program director will find an MOU for a program, the disability services coordinator is key in helping to frame the document to make sure it supports the program's commitments to children with disabilities and their families. All the program staff, including the health manager, the mental-health consultant, the education manager, or professional development coordinator may also give input when developing the MOU. Again, the MOU can be such a helpful tool to create effective partnerships because each partner has their own perspective and organizational structure. The MOU provides an opportunity to work together to define the

roles and the responsibilities, define the areas of collaboration, establish shared goals, and proposed coordination and communication protocols and set deadlines. There are many processes and procedures that an MOU can outline to support effective partnerships. This slide just lists a few, including agreements and details on the joint use of screening results, the coordination of evaluation timelines, sites, and schedules, the parental consent for referral and for development of IEP or IFSP plans, the provision of translation services for families, holding joint professional development efforts, and different options for service delivery. Those are just a few.

Jennifer: Just a few, yeah, and these are really great points, Dayana, and I can see why, looking at this list, it would be so helpful to discuss and agree on these processes ahead of time. And really quickly before we move on, I just want to point out, again, that the disability services coordinator orientation guide has really great guidance on creating successful partnerships, including a whole section on building an MOU and what points and what areas to consider. So, this is a really handy tool.

Alright, so very quickly before we move on, I want to mention that family partnerships are also a really important part of recruiting and enrollment when it comes to recruiting and enrolling children with disabilities. So, we know this process of talking about developmental concerns, the process of referral for eligibility assessment, and especially helping families decide or communicating with families around deciding whether or not to receive IDEA services can be really difficult. So, there are some great resources that program staff can use to partner with families to understand their perspectives, to share information and resources, and really think about intentionally supporting families in a number of different ways, including supporting families through the referral process to really reduce barriers and help families access this referral and evaluation process, whether that's providing translation or arranging for translation or interpretation services, helping families make connections with cultural organizations that help families understand what disability labels and services mean in culturally responsive ways, or helping families access resources to help them advocate for their child.

We also know that many families are unfamiliar with special education or early intervention services and that program staff and DSCs have a big role in helping families understand what these specialized services might look like and how the child may benefit. And we also know it's really important during these family partnerships to support families with advocacy. Program staff should work with families to make sure they have the information they need to advocate for their child and make decisions for their family. So, this might mean sharing information or referring the family to a parent training information center, or programs might offer to have a staff member such as an educator or DSC or mental health consultant attend the IEP or IFSP meeting with families as the Head Start or Early Head Start representative.

So, as we've talked about, this process can be difficult and confusing and overwhelming for many families. So, on your resource list, we've provided some other resources that can support program staff to navigate these conversations and support families. So, Dayana, before we do

our question and answer, I just want to hear what you've been hearing from families. We've heard about the challenges, but let's hear now about some strategies and kind of some lessons learned. And before we get into this specific, these great suggestions, I have a challenge for all of the participants on our webinar today. So, as you are listening to these strategies and listening to what other programs have tried that's been successful for them, think about what's worked for you, and then in the next couple days, visit our My Peers disabilities and inclusion network and respond to the thread that I've set up and let us know what's your top tip for recruitment and enrollment. What's worked, or what's your top tip for establishing partnerships? OK, so, Dayana, I can't wait to hear some of these strategies. What have you been hearing about what's working?

Dayana: Yeah, so programs are getting creative, very creative, and trying some great things. This program in particular shared the suggestion of participating on both the local and state interagency coordinating council, the ICC, to make connections, and not only participating, but becoming an active member and sharing Head Start-related information and resources with this group. Then, this program shared that they have been successful in making connections by participating in state groups, meetings, and taskforces related to early childhood. Again, they fully participated as a member of the group by attending meetings, bringing resources, and sharing information about Head Start and Early Head Start. They specifically worked with the group to make sure that Head Start and Early Head Start guidance appeared in statewide guidance materials.

Jennifer: Oh, I love that suggestion. I could also see this working by having program staff participate in any state efforts related to home visiting as well.

Dayana: Yes. Absolutely, yes. That is correct. So, someone else shared this tip to let folks know about the comprehensive services provided by Early Head Start and Head Start at any and every opportunity. They made the point that many people don't know about all of the services provided by Head Start programs beyond education services, including family engagement, nutrition services, dental, and family medical home. And many people don't realize that Head Start programs provide services to children with disabilities.

So, another program made the suggestion to work closely with your state's Head Start Collaboration Office, and that office can really help set the stage for meaningful partnerships between Early Head Start, Head Start, and Part B or Part C programs.

So, we know programs are doing great things – they're training, hosting family events, creating handouts and tip sheets. During COVID, there's been a lot of virtual events for families. This year, they have really made an effort to include their community partners in this wonderful training event. They open up family events to the community and invited Part C and Part B partners to participate in Head Start trainings. Likewise, they've added the school district and RC agency to their distribution list for when they send out their newsletters, their handouts, their tip sheets. So, it's a great example.

Jennifer: That's great Dayana. I love all of these amazing suggestions, and I'm listening to all of them. And it really seems like a big lesson learned from programs is about how to share the message about these really incredible, comprehensive services that are provided by Head Start, and really to make sure that your community partners know about how much value that you can bring to the partnership.

So, I know that there are lots and lots of other great strategies being used out there, so please don't forget to visit My Peers and share your best tips on recruitment, enrollment, and partnerships.

So, that brings us to the end of our presentation, and I really wanted to thank everybody for joining us today, for participating in the polls, and for asking such great questions in the Q&A. And Dayana, I really want to say such a big thank you to you for being here to clear up some of these questions and share this awesome information.

Dayana: My pleasure. My pleasure.

Jennifer: It's going to be so helpful to programs.